STATE OF VERMONT BI-WEEKLY ACTIVE GROUP PREMIUMS Effective January 1, 2017

TOTAL CHOICE					
CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION	
01	\$470.73	\$376.58	\$94.15	One Person	
1A	\$941.46	\$753.17	\$188.29	Two Person	
1B	\$1,294.50	\$1,035.60	\$258.90	Family	

SELECTCARE POS						
CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION		
01	\$393.97	\$315.18	\$78.79	One Person		
1A	\$787.92	\$630.34	\$157.58	Two Person		
1B	\$1,083.40	\$866.72	\$216.68	Family		